

SEXUAL VIOLENCE IN LATER LIFE



Understanding the dynamics when working with and advocating for older adult survivors of sexual abuse

Length of time for complete module content: 1 Hour

Module learning goal: Advocates understand root causes and dynamics of violence

Competency Learning Objectives Covered:

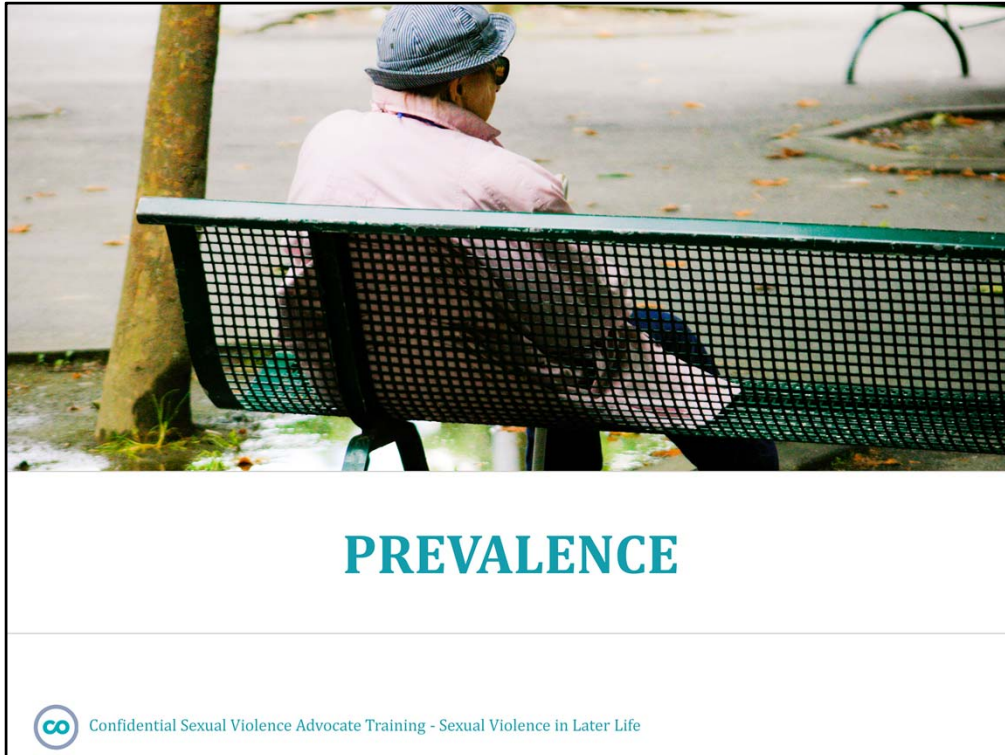
- Describe ways ageism and inequality impact survivors and communities
- Define sexual assault in later life
- Demonstrate culturally relevant advocacy skills
- List at least three considerations for providing advocacy and support to victims of sexual assault in later life

OPENING EXERCISE



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Facilitators may opt to do an icebreaker activity.



PREVALENCE

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Learning objectives addressed:

Describe ways ageism and inequality impact survivors and communities

Facilitator notes:

- True prevalence unknown
- Research still in its infancy
- Small minority of survivors over the age of 60 are seen at hospitals or sexual assault crisis centers
- Underreporting is may be high for older adults compared to those in other age groups
- Most reported older victims are women, but men can be victimized too; Most reported perpetrators are men, but women can be perpetrators too
- Older adults may be overlooked as potential or actual victims of sexual violence due to the myth that adults in later life are not targets for sexual violence; however, older adults with cognitive disabilities are at a higher risk for victimization
- Due to these myths and generational issues, there are barriers and shame attached to experiencing sexual violence, and ultimately are less likely to come forward

HOW DOES SEXUAL VIOLENCE LOOK DIFFERENT FOR AN OLDER SURVIVOR?



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TYPES OF SEXUAL VIOLENCE

Contact offenses

Rape; molestation; sexual kissing

Non-contact offenses

Sexual harassment; threats; forced pornography; exhibitionism; humiliation

Additional forms of violence

Unnecessary touching not prescribed



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Learning objectives addressed:

Define sexual assault in later life

Facilitator notes:

- Contact offenses:
 - Oral, anal, and vaginal rape
 - Molestation
 - Sexual kissing
- Non-contact offenses
 - Sexual harassment
 - Threats
 - Forced pornography viewing
 - Using older adults to produce pornography
 - Exhibitionism
 - Exposing the victim's breasts or buttocks as a form of humiliation
- Additional forms of sexual violence
 - Unnecessary, obsessive, or painful touching of the genital area that is not part of a prescribed nursing care plan
 - Examples—inserting spoons or fingers into an older adult's rectum, and cleaning inner and outer vaginal areas with alcohol wipes, despite medical warnings that these behaviors are potentially harmful as well as painful

WHAT TO LOOK FOR



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SYMPTOMS/SIGNS

Physical injuries

Psychosocial trauma responses

Perpetrator signs

Sharing a bed

Wife as “property”



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Learning objectives addressed:

Define sexual assault in later life

Facilitator notes:

- Physical:
 - Genital, anal, throat, and oral injuries
 - Bruising on breasts, buttocks, thighs, neck, and other body areas
 - Imprint injuries
 - Human bite marks
 - STD diagnosis
- Psychosocial trauma symptoms:
 - Sleep disturbances
 - Incontinence
 - Increased anxiety
 - Crying spells
 - Withdrawal
 - Depressive symptoms
 - Agitation
 - Restlessness
 - Decreased enjoyment in activities
 - Intrusive memories
 - Attempts to leave care facilities in which they were previously willing to remain
- Perpetrator signs:
 - Adult sons sharing a bed with older mother suffering from dementia
 - Intimate partners viewing their wives as “sexual property”



COMMON TYPES OF PERPETRATION



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INTIMATE PARTNER SEXUAL VIOLENCE

Vulnerability to ongoing victimization

Conflict with belief systems

May want to maintain relationship



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Define sexual assault in later life

Facilitator notes:

- IPSV can go undetected for years, especially if it is an ongoing occurrence—this makes it more likely for victimization to continue
- Example case: a survivor’s husband felt that it was his right to force his wife sexually—could be due to belief systems that were in place years ago, or potential cultural barriers
- Some survivors may want the abuse to stop but still maintain a relationship with their partner

INCEST

Adult sons

Barriers to reporting

May want to maintain relationship



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Define sexual assault in later life

Facilitator notes:

- Some survivors have experienced violence from their adult sons
- Even if the assault is reported, the survivor may not be believed due to disbelief that such an act would occur, or believing that the older adult is confused or experiencing a cognitive disability
- Despite the abuse, some survivors may want to maintain a connection with the abuser

OTHER RELATIVE OR CAREGIVER

Manipulation

Purposefully seek out employment



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Define sexual assault in later life

Facilitator notes:

- Some perpetrators may manipulate their victims and claim that certain offenses are part of the caregiving tasks
- Example case: a caregiver said he needed to “clean” the older adult’s genitals and then proceeded to sexually assault her with an object
- Some perpetrators may seek out employment and other opportunities in order to commit assault
- It is imperative that health care and aging services receive training on recognizing, understanding, and responding to sexual violence against older adults

RESIDENT OFFENDERS

Can be staff or other resident

Vulnerability to ongoing victimization

Barriers to disclosing/reporting



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Learning objectives addressed:

Define sexual assault in later life

Facilitator notes:

- Resident offenders can include staff as well as other residents
- Survivors who have experienced sexual violence in a care facility may find barriers to leaving the residence due to health limitations or placement status—this makes them vulnerable to ongoing abuse



SPECIAL CONSIDERATIONS



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AGING ISSUES

Many physical changes

Sustain injuries much more easily

Changes in brain function

Slower to heal from injuries

Increased dependence on others



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Learning objectives addressed:

Define sexual assault in later life

List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- Many changes occur to an individual as they age
 - Changes in memory and sensory abilities (sight, hearing),
 - Decline in mobility
 - Lowered immune functioning
 - Changes in organs
- Bones, skin, and tissue become more fragile and can sustain injuries much more easily than a younger person, and they also heal much slower
- Older adults may process information more slowly due to changes in brain function—it's important to keep this in mind when speaking to an older survivor
- Many of these factors affect self-care abilities and increase dependence upon other individuals, which makes them vulnerable to abuse and increases the severity of the injuries and consequences of the abuse

GENERATIONAL THINKING

Change in culture and society

Social stigmas

Unaware of services



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Describe ways ageism and inequality impact survivors and communities
Define sexual assault in later life

Facilitator notes:

- Older adults were raised in a much different society and culture than our current culture
- Victim blaming statements and social stigmas attached to sexual violence were much more heightened when they were growing up, which may contribute to an older adult's lack of reporting or disclosing
- When it comes to IPSV, many female victims may believe that it is their "wifely duty" to submit to their husband sexually; husbands may also believe that their wife is their sexual property and "owes" them sex
- Many services for survivors were not available until the 70s, so survivors may be unaware of services available to them—as advocates, we can inform them of available services

BARRIERS TO REPORTING



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BARRIERS TO REPORTING

Shame & myths around sexual violence in later life

Cognitive disabilities

Not believing survivors

Abusers may purposefully isolate

Lack of education for health care professionals

Male survivors



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Learning objectives addressed:

Describe ways ageism and inequality impact survivors and communities

Define sexual assault in later life

Facilitator notes:

- Due to shame and myths around sexual violence in later life, they are less likely to come forward
- Many older survivors may have conditions such as dementia that prohibit them from reporting
- Some survivors who have reported haven't been believed, but rather assumed to be psychotic or demented
- Caretakers and abusive relatives may deny older survivors the opportunity to report by prohibiting access to phones and visitors
- Perpetrators may use conditions such as dementia to discredit and isolate survivors
- Many physical indicators are also missed by health care professionals due to lack of education and awareness
- Marks on an older person's body may be mistaken for "normal" markings on an older body
- Male survivors
 - May think sexual violence is a "women's issue"
 - Less likely to come forward
 - Social stigmas attached to victimization may be higher for a male victims compared to a female victim, especially if there are additional cultural barriers that contribute to these stigmas
 - All these factors can lead to underreporting for male survivors



ADVOCACY



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CHECKING PRIVILEGE



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Describe ways ageism and inequality impact survivors and communities

Demonstrate culturally relevant advocacy skills

List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- Avoid succumbing to ageism
- Don't assume all older adults are frail, mentally incompetent, and/or asexual
- Approach older adults with the same open-mindedness, respect, and sensitivity that should be afforded to all survivors

RESPECT CULTURAL/RELIGIOUS TRADITIONS



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Learning objectives addressed:

Demonstrate culturally relevant advocacy skills

List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- Cultural or religious traditions may have helped shape their lives and belief systems
- We must respect these values and keep this in mind when assisting in their decision-making process
- Cannot allow personal biases to cloud judgment or affect advocacy

RELATIONSHIP WITH ABUSER



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Demonstrate culturally relevant advocacy skills

List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- Many older victims may want to maintain a relationship with their abuser, especially if the abuser is a significant other, adult child, caregiver, or family member
- Survivors may look for help in ending the abuse while maintaining the connection—advocates should take this into consideration when safety planning

FOCUS ON SAFETY



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Demonstrate culturally relevant advocacy skills

List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- Often survivors may have already engaged in strategies and behaviors to help keep themselves safe
- advocates can support and build on these strategies while also brainstorming further options
- Create a safety plan, if one is not already in place
- Especially important if the survivor wants to maintain a relationship with the abuser—if they are not willing to cut ties with the abuser, advocates can brainstorm ways to promote safety instead

ACCESSIBILITY



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Facilitator notes:

- Consider the potential need for transportation assistance, and access to mobility devices such as wheelchairs, walkers, or canes
- Shelter and transitional housing programs should consider preparations for housing services animals and general access to those who may need to use a mobility device—this also includes centers who offer on-site counseling
- Providing bus tokens, taxi fares, and reimbursement for travel may assist in providing easier access to resources and services
- Centers can take into consideration limited mobility by offering telephone counseling or meeting with the survivor at an easily accessible location
- Consider mobility, vision, or hearing challenges—may need help addressing medical or disability issues while considering their options
- Consider working with local health care providers, local Centers of Independent Living, and Aging and Disability Resource Centers
- Accommodations for individuals with hearing loss may benefit from the use of a personal listening device during counseling sessions
- When speaking to an older adult, advocates may need to slow the rate of providing information; additionally, allow older survivors time to process and formulate their thoughts and put them into words—patience is key
- People in later life may need to have information repeated or written down due to memory changes; allow extra time to speak with an older individual on a hotline call, perhaps longer than you would allot to a younger survivor

VARIETY OF AGES



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Demonstrate culturally relevant advocacy skills

List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- Some older adults may feel uncomfortable talking with very young advocates
- Centers can work toward having a staff and volunteer group represent a variety of ages, which may help older survivors feel at ease

MANDATORY REPORTING



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List at least three considerations for providing advocacy and support to victims of sexual assault in later life

Facilitator notes:

- We are mandated to report elder abuse
- <http://www.nj.gov/ooie/helpful/mandatoryreportingdescript.html>
- How to report: <http://www.nj.gov/ooie/pdf/EoreportinggridFinal.pdf>

QUESTIONS? COMMENTS?



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REFERENCES

Ramsey-Klawnsnik, H. (2010) *Sexual Violence in Later Life: A Technical Assistance Guide for Advocates*. National Sexual Violence Resource Center. Retrieved from http://www.nsvrc.org/sites/default/files/publications_SVlaterlife_Guide.pdf

(2013) *Working with Victims of Abuse in Later Life*. National Clearing House on Abuse in Later Life (NCALL). Retrieved from <http://www.ncall.us/sites/ncall.us/files/resources/4.%20Working%20with%20Victims-HTMLfinal.pdf>

